Image# 12951900415 PAGE 1 / 8

FEC FORM 1		<u> </u>	ATEME! GANIZ		-				Office Us	se Only		
NAME OF COMMITTEE (in	n full)	,	eck if name hanged)		le:If typing le lines.	ı, type	12F	E4M5				
Synovus F	inanci	al Corp	o. Comm	nittee	for Go	ood L	eade	ershi	p	1 1	1 1	, , I
ADDRESS (number a	nd street)	Post Office	Box 120									
(Check if address is changed)		Columbus				1	GA] 3	1902	. 1.		
				CITY			STATE	J L		ZIP CC	DE	
COMMITTEE'S E-MA (Check if is change	address		ovide only one e en@synovustru		ess)							
COMMITTEE'S WEB	PAGE ADD	RESS (URL))									
(Check if is change												
2. DATE 0	M / D 16		012									
3. FEC IDENTIFIC	CATION NU	MBER	C	00200642								
4. IS THIS STATE	MENT	NEW (N) OR	×	AMEND	ED (A)						
I certify that I have of	examined thi	s Statement	and to the bes	t of my kno	owledge ar	nd belief it	is true,	correct a	nd com	olete.		
Type or Print Name	of Treasurer	Samuel F.	Hatcher									
Signature of Treasure	Samuel . er	F. Hatcher		[1	Electronical	ly Filed]	Date	M = M 05	2	5	Y Y 2	012
NOTE: Submission of			plete information						ne penal	ies of 2	· U.S.C	c. §437g.
Office				F	or further in	formation o	ontact:					4

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
-----------------------	--	--	--	--	---	---------------------------------	--

F	FEC Fo	orm 1 (Revised 02/2009)	Page 2					
		COMMITTEE						
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate					
Name Cand								
Cand Party	lidate Affiliati	ion Office Sought: House Senate President	State					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name Cand								
Part	ty Con	nmittee: (National, State	(Democratic,					
(d)			Republican, etc.) Party.					
Poli	tical A	action Committee (PAC):						
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-	nected organization is a:					
		X Corporation Corporation w/o Capital Stock	Labor Organization					
		Membership Organization Trade Association	Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.						
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or party					
		In addition, this committee is a Lobbyist/Registrant PAC.						
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fundraising Representative:								
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political					
	Com	nmittees Participating in Joint Fundraiser						
	1.	FEC ID number						
	2.	FEC ID number						
	3.	FEC ID number						
	4.	FEC ID number						

	-			_					
	550 5 4 (5)	20/2000)		5 2					
۱۸/	FEC Form 1 (Revised (Page 3					
	Synovus Financial Corp. Committee for Good Leadership								
_		•	•	PAO C:					
ö.	-	Organization, Affiliated Committee, Joint Fundraising	Representative, or Leadership	PAC Sponsor					
S	ynovus Financial Col	-p.							
	Mailing Address	P.O. Box 120							
	Mailing Address								
		Columbus	GA 31902						
		CITY	STATE ZII	P CODE					
			JIAIL ZII	CODE					
	Relationship: X Connected	d Organization Affiliated Committee Joint Fundra	hising Representative Leade	rship PAC Sponsor					
	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and	position of the person in posses	ssion of committee					
	Beth Peter	san							
	Full Name	Jen							
	Mailing Address	P.O. Box 120							
		Columbus	GA 31902	-					
	Title or Position	CITY	CTATE 71	CODE					
	Title of Position	CITY	STATE ZIF	P CODE					
	Custodian of Records	Telephone	e number 706 - 64	9 - 5985					
	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer cassistant treasurer).	of the committee; and the name	and address of					
	Full Name Samuel F.	Hatcher							
	of Treasurer								
	Mailing Address	Post Office Box 120							
		Columbus	GA 31902						
	Tide on Decision	CITY	STATE ZIF	CODE					
	Title or Position Treasurer	Telephone	706 649	9 - 4765					
		icieptione							

9.

FEC Form 1 (Revised 02/2009)	Page 4						
Full Name of Designated Agent Steven C. Evans							
Mailing Address P.O. Box 120							
Columbus GA 31902 CITY STATE ZIP	CODE						
Title or Position Assistant Treasurer Telephone number							
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. First Commercial Bank							
P.O. Box 11746 Mailing Address							
Birmingham AL 35202							
CITY STATE ZIF	CODE						
Name of Bank, Depository, etc.							
Mailing Address							
CITY STATE ZIF	CODE						

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Synovus Financial Corp. Georgia Fund for Effective Leadership P.O. Box 120 Mailing Address GΑ 31902 Columbus **CITY** STATE 4 ZIP CODE Relationship: **Connected Organization** Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

FEC Form 1G (Revised 06/2011) Page 6 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Synovus Financial Corp. Florida Fund for Effective Leadership P.O. Box 120 Mailing Address GΑ 31902 Columbus **CITY** STATE 4 ZIP CODE Relationship: **Connected Organization** Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

Page 7 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Synovus Financial Corp. Tennessee Fund for Effective Leadership P.O. Box 120 Mailing Address GΑ 31902 Columbus **CITY** STATE 4 ZIP CODE Relationship: **Connected Organization** Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number

Page 8 FEC Form 1G (Revised 06/2011) List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **NBSC PAC** P.O. Box 1457 Mailing Address 29202 SC Columbia **CITY** STATE 4 ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number